A nonpartisan public policy and research office of the Connecticut General Assembly

Testimony of

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Connecticut's Legislative Commission on Aging

Human Services and Appropriations Public Hearing October 22, 2014

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Senator Bye, Representative Walker, Senator Slossberg, Representative Abercrombie and esteemed members of the Appropriations and Human Services Committees, my name is Deb Migneault and I am the Senior Policy Analyst for Connecticut's Legislative Commission on Aging. I thank you for this opportunity to comment on the proposed waiver renewals and amendments before you today.

Connecticut's Legislative Commission on Aging is the nonpartisan, public policy office of the General Assembly devoted to preparing Connecticut for a significantly changed demographic and enhancing the lives of the present and future generations of older adults. For over twenty years, the Legislative Commission on Aging has served as an effective leader in statewide efforts to promote choice, independence and dignity for Connecticut's older adults and persons with disabilities. CoA's LTSS Partnerships

Long-term Care Advisory Council, chair

Money Follows the Person Steering Committee, member

Workforce Development Workgroup, chair

Home Care Program for Elders Advisory Council, member

Community First Choice Council, member

MAPOC, member

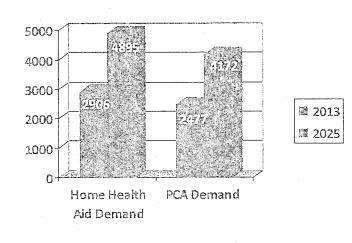
Connecticut's Legislative Commission on Aging continues to dedicate significant time and energy putting forth recommendations and providing oversight and input regarding the implementation of Connecticut's Medicaid rebalancing efforts. These efforts involve highly complex and multifaceted policy, programmatic, regulatory and funding issues. The bottom line is that these efforts help give people choice in where and how they receive long-term services and support.

We have worked with your committees on legislation that supports these initiatives and are truly grateful for your continued commitment to this work. We are particular committed to and interested in expanding access to home and community based services. As you know, in Connecticut, the primary structure for



Medicaid home and community based services are through the various Medicaid waivers.

We are supportive of the waiver amendments and renewal before you today. In particular we support the additional slots allocated to the waivers and the added services to the PCA waiver of agency-based PCA's and Independent Support Broker. Data that has been gathered through the Money Follows the Person Rebalancing Demonstration has shown both the need and the success of adding the agency-based PCA's and the Support Broker Service to the PCA waiver. Additionally, we are fully supportive of the Department's request to increase the cost caps on the PCA and Elder waivers to one hundred twenty percent of the average cost of nursing facility care to comply with the collective bargaining agreement.



CT's Legislative Commission on Aging has served in a various capacities with the Money Follows the Person (MFP) Rebalancing Demonstration, the state's primary driver of home and community based care systems change in our state. Over the last several years, we have served as the chair of the MFP steering committee and chair of the MFP workforce development subcommittee. In

this capacity, we are keenly aware of the dramatic demand in the immediate future for direct care workers in Connecticut.

As Connecticut aggressively pursues the Medicaid long-term care rebalancing goals set forth in Governor Malloy's Strategic Rebalancing Plan and the goals set forth in the state's Long-Term Services and Supports plan, the need for focused efforts to recruit, train, retain and support direct care workers is essential. Without a focused, coordinated approach, lack of direct care workers will stall rebalancing efforts and Connecticut will fail to meet its goals.

As of January 2014 the Federal Fair Labor Standards Act has new rules that extend minimum wage and overtime protections to home care workers, who were previously excluded. Under the new rule, home-care workers have to receive the federal minimum wage of \$7.25 an hour and time and a half when they work more than 40 hours a week.

Earlier this month, the US Department of Labor (DOL) announced that while the new rule will be implemented in January 2015, the US DOL will delay enforcement to give states an opportunity to design a plan for compliance. We would like to take this opportunity to raise awareness about this most important and complex issue and the need to engage in planful approach towards compliance. It is important that DSS engages in a thorough analysis of the potential cost of this new rule and potential impact on consumers. We encourage a collaborative effort between legislators, stakeholders and executive branch officials to begin to plan for how this rule will be implemented without harming consumers while also recognizing the need to support our highly valuable direct care workforce.

The overtime issue is of particular concern for consumers who have overnight care needs or live-in care (24/7) needs and utilize agency-based workers for their care. We must find ways of maintaining these critical services for consumers while adequately supporting our direct care workers and complying with the new federal rule.

We look forward to serving as a resource in future discussions with you, the Department and stakeholder to address these issues and find solutions based on data which honors both the individual consumer and the worker.

Thank you again for this opportunity to comment. As always, please contact us with any questions. It's our pleasure and privilege to serve as an objective, nonpartisan resource to you.